

Schedule BA-410

**Vermont Corporate and Business
Income Tax Affiliation**



* 2 2 4 1 0 1 1 0 0 *

**Attach to Form CO-411
or Form BI-471**

REQUIRED FOR COMBINED AND CONSOLIDATED RETURNS

Please provide information only for affiliates/subsidiaries with nexus in Vermont.

Entity Name (same as on Form CO-411 or Form BI-471)	Fiscal Year Ending (YYYYMMDD)	FEIN

Affiliate Name			FEIN		
Address			For Department Use Only		
Address (Line 2)					
City	State	ZIP Code			
Foreign Country					
Affiliate Name			FEIN		
Address			For Department Use Only		
Address (Line 2)					
City	State	ZIP Code			
Foreign Country					
Affiliate Name			FEIN		
Address			For Department Use Only		
Address (Line 2)					
City	State	ZIP Code			
Foreign Country					
Affiliate Name			FEIN		
Address			For Department Use Only		
Address (Line 2)					
City	State	ZIP Code			
Foreign Country					

USE ADDITIONAL SCHEDULES, IF NECESSARY